

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 / 564

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DR. KENNETH KAPLAN

Mailing Address 557 CRANBURY RD
SUITE 3

City State Zip Code
EAST BRUNSWICK NJ 08816-5419

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 1 / 2 0 1 0

Transaction ID: SA11.13272493

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

DR. KASRA KARAMLOU

Mailing Address 1130 NW 22ND AVE
STE 100

City State Zip Code
PORTLAND OR 97210-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer
OHSU CANCER INSTITUTE

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.13262661

Amount of Each Receipt this Period

300.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. TEMPELTON KASASD

Mailing Address 151 OLD MONTGOMERY HWY APT A

City State Zip Code
BIRMINGHAM AL 35216-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer
DARK-WATER COMMUNICATIONS

Occupation
TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 2 / 2 0 1 0

Transaction ID: SA11.SAT0007

Amount of Each Receipt this Period

900.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)